
Alabama Medicaid Agency • Pharmacy Services Division

Tamper Resistant Prescriptions

Provider Compliance Referral Form

Effective April 1, 2008, federal law requires that all written, non-electronic outpatient Medicaid prescriptions be issued on tamper-resistant prescription paper. This form is designed to assist the Agency in coordinating educational efforts for non-compliant providers in conjunction with provider associations. Questions about this form or its use should be directed to the Medicaid Pharmacy Services Division at (334) 242-5050.

Fill in the information and fax to: (334) 353-7014

Submitting Pharmacy should provide the following information for non-compliant prescribers (* denotes required information):

Prescriber name * _____
License number * _____ Phone # with area code _____
Address _____

Prescriber name * _____
License number * _____ Phone # with area code _____
Address _____

Prescriber name * _____
License number * _____ Phone # with area code _____
Address _____

Prescriber name * _____
License number * _____ Phone # with area code _____
Address _____

Prescriber name * _____
License number * _____ Phone # with area code _____
Address _____

Prescriber name * _____
License number * _____ Phone # with area code _____
Address _____

Submitting Pharmacy* _____ **Date** _____

Provider # _____ **Phone # with area code** _____

Fill in the information and fax to: (334) 353-7014